Office Use Only
Scholarship Awarded: YES NO Date: _____
Student Notified by: Email Phone Date: _____ By: _____

Florida Prison Education Project Scholarship Application

Deadline: April 1

Return completed application to fpep@ucf.edu
Incomplete applications cannot be considered

Student Name:

PID:

Address:

City/State/Zip:

Cell Phone:

E-mail Address:

Please use the space below to tell us about your personal background and commitment to higher education in prison and social justice.

Signature: _____